## FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVE PAGE 1/3
SECRETARY OF THE SENATE
PUBLIC RECORDS

14 MAR 31 AM 9: 09

(a) Name of Candidate (in full)											
Alison Lundergan Grimes											
(b) Address (number and street) 628 West High Street	☐ Check if address changed			2. 0	Candidate's FEC Identification Number     S4KY00091						
(c) City, State, and ZIP Code					3.	Is This		New		Amer (A)	ided
Lexington		KY	40508	3		Statement	لحك	(N)	OR	(A)	
4. Party Affiliation	5. Office Sought			6. State & Dis	trict of	Candidate					
DEMOCRATIC PARTY	Senate			KY		00					
DE	SIGNATION OF	PRINC	IPAL	CAMPAIG	N C	ТТІММС	EE				
7. I hereby designate the following nat	med political committe	e as my Pr	incipal (	Campaign Com	mittee	for the(ye	2014 ar of e	lection	_ election	on(s).	
NOTE; This designation should be	filed with the appropria	ate office lis	sted in th	ne instructions.							
(a) Name of Committee (in full)											
Alison for Kentucky											
(b) Address (number and street) 340 Democrat Drive			•								
(c) City, State, and ZIP Code		<del></del> -	<del></del>		•		-		-		
Frankfort				KY		40601					
NOTE: This designation should be  (a) Name of Committee (in full)	filed with the principal	campaign	committ	ee.					<del>_</del>		
Off the Sidelines: K	entucky & Ge	orgia									
(b) Address (number and street) 600 Pennsylvania SE, Ste. 21	0									• " •	
(c) City, State, and ZIP Code				····							
Washington		_		DC		20003					
I certify that I have ex	amined this Statemen	t and to the	best of	my knowledge	and b	elief it is tru	e, con	rect an	d comp	ete.	
Signature of Candidate					Da	ite					•
Alison Lundergan Grimes  Oliver Gunden	m Gara	•			O	3/27/2014					
NOTE: Submission of false, erroneous	s, or incomplete inform	nation may	subject	the person sign	ing th	is Statemen	t to pe	enalties	of 2 U	S.C. §437g.	
							<del>-</del>			-	
				_,l	<u>L.</u>	<u>-</u>			Fi	C FORM 2 (REV	/. 02/2009

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 /
	THER AUTHORIZED COMMITTEES oint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my p candidacy.	principal campaign committee, to receive and expend funds o	on behalf of my
NOTE:This designation should be filed with the principal ca	ampaign committee.	
(a) Name of Committee (in full)		
Grimes Senate Victory		
(b) Address (number and street) 120 Maryland Ave NE		
(c) City, State and ZIP Code		
Washington	DC 20002	
	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my particles.	principal campaign committee, to receive and expend funds	on behalf of my
NOTE: This designation should be filed with the principal ca	ampaign committee.	
(a) Name of Committee (in full)		
Democratic Victory 2014		
(b) Address (number and street) 600 Pennsylvania Ave. SE Suite 210		
600 Pennsylvania Ave. SE		
600 Pennsylvania Ave. SE Suite 210	DC 20003	
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT	DC 20003  THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)	[ ADDITIONAL ]
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)	-
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT (Including J	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)  principal campaign committee, to receive and expend funds	
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT  (Including J	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)  principal campaign committee, to receive and expend funds	
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT (Including J I hereby authorize the following named committee, which is NOT my population.)  NOTE:This designation should be filed with the principal committee.	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)  principal campaign committee, to receive and expend funds	
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT  (Including J  I hereby authorize the following named committee, which is NOT my particularly candidacy.  NOTE:This designation should be filed with the principal committee (in full)	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)  principal campaign committee, to receive and expend funds	
600 Pennsylvania Ave. SE Suite 210  (c) City, State and ZIP Code Washington  DESIGNATION OF OT (Including J  I hereby authorize the following named committee, which is NOT my parameters of candidacy.  NOTE:This designation should be filed with the principal committee of Committee (in full)  Georgia Kentucky Victory Fund  (b) Address (number and street) 600 Pennsylvania Ave. SE	THER AUTHORIZED COMMITTEES  Joint Fundraising Representatives)  principal campaign committee, to receive and expend funds	

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## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)	Page 3 /
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds candidacy.	on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	· · · · · · · · · · · · · · · · · · ·
Texans for a Progressive Senate	
(b) Address (number and street) 600 Pennsylvania Ave. SE Suite 210	
(c) City, State and ZIP Code	
Washington DC 20003	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds candidacy.	on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
(b) Address (number and street)	
(c) City, State and ZIP Code	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ ADDITIONAL ]
	- babakara
1 hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds candidacy.	on benait of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	<u>, , , , , , , , , , , , , , , , , , , </u>
(b) Address (number and street)	
(c) City, State and ZIP Code	

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

DANA K MEEALLUM SUPERINTEINDENT

ENATE DITICE BUILDING SumE 232 DURE CAC WASHINGTON, DC 20510-71 PHONE (202) 224-0322

THE PRECEDING DOCUMENT WAS: 2-31-14
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